

# Contractor Safety Briefing Training

## Contractor Details

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

GPA Project Lead Name \_\_\_\_\_

## Training

By signing the completion sheet you confirm that you have viewed the required safety induction. And that you understand and agree to comply with the site rules as stated in the presentation.

	Name	Signature	Date	Safety Briefing Completed (A, B or C)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

<b>A</b>	Landside Safety Briefing	<b>B</b>	Landside & Airside Safety Briefing
<b>C</b>	Landside & Rail Station Safety Briefing		

**Any company or contractor found to in breach of the site rules as detailed in the Safety Briefings may be removed from site and will have their access privileges removed at no cost to the airport.**